

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

APPLICANT(S)

FILED DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4		3				
5	1					
6		1				
7		2				
8	1					
9		1				
10		2				
11		1				
12		1				
13		1				
14		1				
15		1				
16		1				
17		2				
18		2				
19		2				
20		2				
21		2				
22		1				
23		1				
24		2				
25	1					
26		1				
27		1				
28		1				
29		4				
30	1					
31		4				
32		4				
33		2				
34		2				
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48						
49						
50						
TOTAL IND.	7					
TOTAL DEP.		54				
TOTAL CLAIMS	61					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51						
52						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						